NO. OF COPIES RECEIVED	4			
		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110	
SANTA FE	REQUEST I	FOR ALLOWABLE	Effective 1-1-65	
FILE U.S.G.S.		AND	A.C.	
LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	A5	
OIL	4			
IRANSPORTER GAS	-			
OPERATOR	4			
PROBATION OFFICE	API #30-025-27279			
Operator				
Phillips Petroleum Comp	any			
Address	4			
Room 401, 4001 Penbrook	, Odessa, Texas 79762			
Reason(s) for filing (Check proper box		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil Dry Gas	s L		
Change in Ownership	Casinghead Gas Conden	sate		
If change of ownership give name and address of previous owner	N/A			
-				
DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	rmation Kind of Lease	Lease No.	
			cr Fee State B-2423-12	
East Vacuum Gb/SA Tract	29p2 UU3 Vacuum Gb/SA		State	
Unit Letter ; 2	080 Feet From The North Line	e and <u>660</u> Feet From T	he <u>West</u>	
			Lea County	
Line of Section 29 Tox	wnship T-17-S Range R-	35-Е , МРМ,	Lou County	
DECICY ATTON OF TRANSPORT	TED OF OH AND NATURAL OA	s		
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)	
Texas New Mexico Pipeli Name of Authorized Transporter of Car	ne singhead Gas X or Dry Gas	P. O. Box 2528, Hobbs, Address (Give address to which approv	ed copy of this form is to be sent)	
Phillips Petroleum Comp		4001 Penbrook, Odessa,		
	Unit Sec. Twp. Ege.	Is gas actually connected? Whe		
If well produces oil or liquids,	10nit, sec. $10mp$, rige. N 128 17-S 35-E		6-14-82	
give location of tanks.			0 17 02	
	th that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Flug Back Same Restv. Diff. Restv.	
Designate Type of Completio		X		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Date Spudded	5-24-82	4800'	4750'	
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Eievations (DF, RKB, RT, GR, etc.) 3972' GL, 3983' RKB,		4454'	4455	
3970' GR	Grayburg/San Andres	1	Depth Casing Shoe	
4495'-4520', 4526'-4540	', 4575'-4585' Total 49	9' - 52 shots	4794'	
		CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-1/4"	8-5/8"	371'	400 sxs C1 "C" cmt w/2%	
12-1/4	(CaC	1, and 1/4# Flocele/sx	Circd 40 sxs to surface)	
7-7/8"	5-1/2"	4794'	800 sxs TLW w/12# sx sal	
			1.w/400 sxs C1 "C" w/6# sx (salt. Circd 241 sxs) and must be equal to or exceed top dilow.	
	OP ALLOWARIE (Test must be a)	ter recovery of total volume of load oil	(salt. Circd 241 sxs)	
. TEST DATA AND REQUEST F OIL WELL	able for this de			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	(t, etc.)	
6-3-82	6-14-82		sert pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
24 hrs				
Actual Prod. During Test	Cil-Bbis.	Water-Bbls.	Gas - MCF	
	98	48	12	
l		1	* * *	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIAN		OIL CONSERVA	TON COMMISSION	
. UERIIFICALE OF COMPELAN			COMMISSION	
• • • • • • • • • • • • • • • • • • •	regulations of the Oil Conservation	APPROVED	, 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYORIGHEAU SIGNED BY		
				()
This form is to be filed in compliance with RULE 1104.				
X Mulle	W. J. Mueller	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation		
(Signature)		tests taken on the well in accor	rdance with RULE 111.	
Sr. Engineering Specialist		All sections of this form must be filled out completely for allow-		
	itle)	able on new and recompleted we	ells.	
June 21, 1982		Fill out only Sections I. I	I. III, and VI for changes of owner,	
	late)	well name or number, or transpor	ter, or other such change of condition. It be filed for each pool in multiply	
		Separate Forms C-104 mus completed wells.	the mention of the post in maniping	
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